

# HEALTH AND HUMAN SERVICES CAPITAL IMPROVEMENT PROGRAM

The 2008 Executive Proposed Capital Budget for Health and Human Services is divided into two programmatic areas: the capital projects administered by the Harborview Medical Center and the technology projects administered by County agencies. The Harborview capital program outlined at the close of this section amounts to \$4 million and does not include the Harborview bond projects. The other county Health and Human Service capital project proposals include \$546,560 for technology projects and \$35,000 for facility projects.

## Introduction to Program, Goals, and Highlights

The Health and Human Services Capital Improvement Program supports facility and technology capital projects to enhance King County health and human service delivery. The goals of capital projects under this program are:

- To maintain the structural integrity and efficiency of all county-owned public health facilities
- To respond to increased need for public health services through timely remodeling and construction
- To assure that the configuration of program and support space maximizes the effectiveness of service delivery

### Department of Public Health and Department of Community and Human Services Capital Programs

Agency	Project Name	2008 Executive Proposed	Existing Project
<b>FACILITIES</b>			
FMD	OMP Public Health Facility Analysis	\$ 35,000	
<b>TECHNOLOGY</b>			
DCHS / DDD	Client Information System	\$ 335,684	
PH	Criteria Based Dispatch Guidelines/CBD Software (Port of Seattle)	\$ 210,876	
<b>TOTALS</b>			
	Facilities	\$ 35,000	
	Technology	\$ 546,560	
	Total	\$ 581,560	

## **2008 Technology Project Highlights**

### **DCHS / DDD: Client Information System – 2008 Proposed Budget \$335,684**

The Department of Community and Human Services (DCHS) Developmental Disabilities Division (DDD) mission statement is “To assist King County residents of all ages and cultures who have developmental disabilities to achieve full, active, integrated, and productive participation in community life.” In order to meet this mission, DDD needs a client information system. The current system, a MS Access database in conjunction with MS Excel spreadsheets, is out of date, cumbersome, incomplete, and difficult to maintain and enhance. Development of a new system will provide the division improved business functions in order to coordinate, institutionalize, automate and streamline business processes, improve communications with outside vendors such as service providers and school districts, and better manage the entire end-to-end billing process.

### **DPH: Criteria Based Dispatch Guidelines/CBD Software (Port of Seattle) – 2008 Proposed Budget, \$210,876**

The King County EMS Division is responsible for medical oversight for the Criteria Based Dispatch (CBD) Guidelines, the triage (sorting) tool used by emergency 911 dispatchers when callers request emergency medical assistance. This project will integrate the CBD software with a new CAD system at the Port of Seattle, Airport Operations Communication Center. This project will result in benefits to customers of the EMS Division, including dispatch centers who will experience improved operational practices and enhanced quality improvement activities, fire departments and ALS providers who will experience improved call handling for their EMS units, and benefits to agencies outside King County who utilize the CBD Guidelines.

### ***Council Adopted Budget***

There were no changes made to the Executive’s Proposed Budget.

## **2008 Facility Project Highlights**

### **Operational Master Plan – Public Health Facility Analysis – 2008 Requested Budget \$35,000**

The 2008 appropriation is to provide funding to Facility Management Division to support Public Health Seattle King County in the development of community-based policies to improve access to quality health care and their appropriate role in the direct provision of health services

### **Harborview Medical Center Capital Program**

The purpose of the Harborview Medical Center (HMC) capital program is to address long term strategic needs, as well as near term operational needs. Projects contained in the six year CIP promote the quality of patient care at Harborview, enhance Harborview’s ability to provide care to priority patients, increase the functionality of the facility and address the sustainable, long term usefulness of Harborview’s physical plant.

Harborview Medical Center’s 2008 capital program of \$4 million is consistent with its mission

and the Major Institution Master Plan (MIMP). The 2008 annual capital program reflects the medical center's priorities to correct life/safety problems, address clinical and patient needs, and improve operational efficiency. The Health Capital Improvement Program also includes funding for joint oversight of Harborview and King County in support of the Harborview Medical Center Bond Program. The HMC Bond Program is the result of voter approval in 2000, authorizing King County to make seismic, health, and public safety improvements at Harborview Hospital funded with voter approved bonds. The improvements included demolition of unsound buildings, construction of new buildings and renovation and upgrading of existing facilities.

### **Project Prioritization Methodology**

HMC develops its Capital Improvement Program based upon its mission, the MIMP, and the requirements of state and federal health care regulatory agencies. The Harborview Board of Trustees makes final prioritization and approval of Harborview Medical Center's Capital Improvement Program. Projects meet the criteria approved by the HMC Board of Trustees to address: (1) life safety or regulatory issues. (2) essential patient care or (3) facilitate the implementation of Harborview's strategic plan and major institutional master plan.

### **Financial Planning and Policy Overview**

The current HMC capital plan is consistent with the MIMP, the supporting Operational Master Plan, and the voter-approved bond measure of September 2000.

Harborview Medical Center retains depreciation reserves annually to fund most of its capital maintenance requirements. HMC also receives some state and federal grant moneys which may be earmarked for specific capital projects or types of capital projects. HMC is increasingly involved in fund raising activities to subsidize various HMC programs, including its ongoing capital requirements. The University of Washington, as the contractual manager of HMC, on occasion supplies resources/capital to fund various projects which support the teaching function of the Medical Center and/or enhance its facilities in order to continue to attract a high level of faculty and physicians as part of the HMC staff.

### **2008 Significant Project Highlights**

This program includes necessary improvements at Harborview Medical Center. Harborview's \$4 million in projects implements the medical center's priorities to correct life/safety issues, address clinical and patient needs, and improve operational efficiency. Projects contained in the capital improvement program also address long term strategic needs, as well as near-term operational needs. The projects promote the quality of patient care at Harborview, enhance Harborview's ability to provide care to priority patients, increase the functionality of the facility and address the sustainable, long term usefulness of Harborview's physical plant.

The following table displays the major Harborview Medical Center projects in the 2008 Executive Proposed Budget:

<b>Significant Projects Harborview Medical Center Capital Improvement Program</b>	<b>2008 Executive Proposed Budget</b>	<b>Continuation of Existing Project</b>
GEH BiPlane	\$600,000	
NJB & IEB Relocation Costs	\$1,000,000	
Fixed Equipment	\$841,001	X
Kitchen Expansion	\$500,000	
2 <sup>nd</sup> MRI Support Spaces	\$400,000	
Clinical Lab Automation Zone	\$385,000	

**GEH Biplane: \$600,000**

This project will provide construction associated with the replacement of existing angiography equipment on GEH with new technology as part of a larger growth strategy for critical Cardiology and Neurosciences care.

**NJB & IEB Relocation Costs: \$1,000,000**

This project covers costs associated with starting up the new Inpatient Expansion Building and the new Ninth and Jefferson Building. Costs include planning and execution of the moves into the buildings, and other start-up costs.

**Kitchen Expansion: \$500,000**

This project provides critical growth of kitchen support spaces, including expanding meal cart washing and assembly areas and food storage expansion. This backfill project is to support inpatient growth provided by the HMC Bond Project.

**Elevator for View Park I: \$400,000**

This project utilizes a portion of the remaining funds from the View Park 2 Garage construction, which will be spent down on remaining improvements to the garage.

***Council Adopted Budget***

There were no changes made to the Executive's Proposed Budget.